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PTO/SB/01 (6-95)

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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

0010/PTO Rev. 6/95	U.S. Department of Commerce Patent and Trademark Office	Attorney Docket Number	H 5165 PCT/US
		First Named Inventor	Wolff, Wolfgang
COMPLETE IF KNOWN			
		Application Number	10/691,427
		Filing Date	October 22, 2003
		Group Art Unit	
		Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Active Ingredient Combinations for Hair-Dyeing Agents

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) 04/18/2002 as United States Application Number or PCT International

Application Number PCT/EP02/04275 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
101 209 14.2	Germany	04/27/2001	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers <input type="checkbox"/> are listed on a supplemental priority sheet attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.

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DECLARATION

Page 2

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(e) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP02/04275	04/18/2002	

Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Firm Name Customer Number or label

List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
Stephen D. Harper	33,243		
Glenn E. J. Murphy	33,539		
Steven C. Bauman	33,832		
Gregory M. Hill	31,369		
Mary K. Cameron	34,789		

Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: Customer Number or label 00423 OR Fill in correspondence address below

Name			
Address			
Address			
City	State	Zip	
Country	Telephone	Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name	Wolfgang	Middle Initial		Family Name	Wolff	Suffix e.g. Jr.			
Inventor's Signature					Date				
Residence: City	Bargteheide	State		Country	Germany	Citizenship	Germany		
Post Office Address	Neue Strasse 36								
Post Office Address									
City	22941 Bargteheide	State		Zip		Country	Germany	Applicant Authority	
<input checked="" type="checkbox"/>	Additional inventors are being named on supplemental sheet(s) attached hereto								

(+/-) inside this box +

H 5165 PCT/US

DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet				
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Mustafa		Middle Initial		Family Name	Akram			Suffix e.g. Jr.
Inventor's Signature						Date			
Residence: City	Hamburg		State		Country	Germany		Citizenship	Germany
Post Office Address	Zylberbergstrasse 14								
Post Office Address									
City	22457 Hamburg		State		Zip		Country	Germany	Applicant Authority
Name of Legal Representative of Additional Joint Inventor:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name		Shigeri	Middle Initial		Family Name	Tanaka			Suffix e.g. Jr.
Signature of Legal Representative of Hiroshi Tanaka (deceased)		Shigeri Tanaka					Date	March 10, 2004	
Residence: City	Saitama City, Saitama Prefecture		State		Country	Japan		Citizenship	Japan
Post Office Address	1251-21 Ohyaguchi, Minami-ku								
Post Office Address									
City	Saitama City, Saitama Prefecture		State		Zip		Country	Japan	Applicant Authority
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name			Middle Initial		Family Name				Suffix e.g. Jr.
Inventor's Signature						Date			
Residence: City			State		Country			Citizenship	
Post Office Address									
Post Office Address									
City			State		Zip		Country		
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name			Middle Initial		Family Name				Suffix e.g. Jr.
Inventor's Signature						Date			
Residence: City			State		Country			Citizenship	
Post Office Address									
Post Office Address									
City			State		Zip		Country		
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Rev. 6/95

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U.S. Department of Commerce
Patent and Trademark Office

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

Declaration Submitted with Initial Filing OR Declaration Submitted after Initial Filing

Attorney Docket Number	H 5165 PCT/US
First Named Inventor	Wolff, Wolfgang
COMPLETE IF KNOWN	
Application Number	10/691, 427
Filing Date	October 22, 2003
Group Art Unit	
Examiner Name	

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Active Ingredient Combinations for Hair-Dyeing Agents

(Title of the Invention)

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is attached hereto

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Application Number and was amended on (MM/DD/YYYY) (if applicable).

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
101 209 14.2	Germany	04/27/2001	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

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DECLARATION

Page 2

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U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP02/04275	04/18/2002	

Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Firm Name _____ Customer Number _____ or label _____
OR

List Attorney(s) and/or agent(s) name and registration number below:

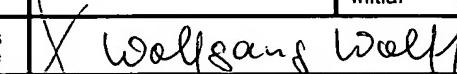
Name	Registration Number	Name	Registration Number
Stephen D. Harper	33,243		
Glenn E. J. Murphy	33,539		
Steven C. Bauman	33,832		
Gregory M. Hill	31,369		
Mary K. Cameron	34,789		

Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence Customer Number _____ or label _____ 00423 OR Fill in correspondence address below

Name	Gregory M. Hill				
Address	Henkel Corporation				
Address	2500 Renaissance Blvd, Suite 200				
City	Gulph Mills	State	PA	Zip	19406
Country	USA	Telephone	610-278-4964	Fax	610-278-6548

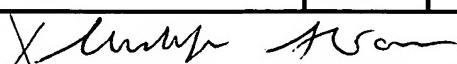
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name	Wolfgang	Middle Initial		Family Name	Wolff	Suffix e.g. Jr.			
Inventor's Signature						Date	X 24.10.03		
Residence: City	Bargteheide	State		Country	Germany	Citizenship	Germany		
Post Office Address	Neue Strasse 36								
Post Office Address									
City	22941 Bargteheide	State		Zip		Country	Germany	Applicant Authority	
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto									

(+) inside this box →

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Page 2

DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet					
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name	Mustafa		Middle Initial		Family Name	Akram		Suffix e.g. Jr.		
Inventor's Signature					Date	X 24.10.2003				
Residence: City	Hamburg		State		Country	Germany	Citizenship	Germany		
Post Office Address	Zylberbergstrasse 14									
Post Office Address										
City	22457 Hamburg		State		Zip		Country	Germany	Applicant Authority	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name	Hiroshi		Middle Initial		Family Name	Tanaka		Suffix e.g. Jr.		
Inventor's Signature					Date					
Residence: City	Urawa City, Saitama Prefecture		State		Country	Japan	Citizenship	Japan		
Post Office Address	1-15-3 Banba									
Post Office Address										
City	Urawa City, Saitama Prefecture		State		Zip		Country	Japan	Applicant Authority	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name			Middle Initial		Family Name				Suffix e.g. Jr.	
Inventor's Signature					Date					
Residence: City			State		Country			Citizenship		
Post Office Address										
Post Office Address										
City			State		Zip		Country			Applicant Authority
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Given Name			Middle Initial		Family Name				Suffix e.g. Jr.	
Inventor's Signature					Date					
Residence: City			State		Country			Citizenship		
Post Office Address										
Post Office Address										
City			State		Zip		Country			Applicant Authority
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto										